



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 3749

|                             |                                   |              |                        |                                  |
|-----------------------------|-----------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>09/819,492 | FILING DATE<br>03/28/2001<br>RULE | CLASS<br>379 | GROUP ART UNIT<br>2642 | ATTORNEY<br>DOCKET NO.<br>Inno 4 |
|-----------------------------|-----------------------------------|--------------|------------------------|----------------------------------|

## APPLICANTS

Fu-Hua Liu, Cupertino, CA;  
 Shih-An Cheng, Milpitas, CA;  
 Chen-Huei Chang, Cupertino, CA;  
 Chih-Ping Lee, Cupertino, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 05/05/2001

\*\* SMALL ENTITY \*\*

|                                 |                                                                                                          |                     |                   |                 |                       |
|---------------------------------|----------------------------------------------------------------------------------------------------------|---------------------|-------------------|-----------------|-----------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no                                                 | STATE OR<br>COUNTRY | SHEETS<br>DRAWING | TOTAL<br>CLAIMS | INDEPENDENT<br>CLAIMS |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | CA                  | 5                 | 62              | 10                    |
| Verified and<br>Acknowledged    | Examiner's Signature _____ Initials _____                                                                |                     |                   |                 |                       |

## ADDRESS

Timothy P. O'Hagan  
 PO Box 1054  
 Portsmouth , NH 03802

## TITLE

System and method for determining a connectionless communication path for communicating audio data through an address and port translation device

|                                |                                                                                                                   |                                                                   |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| FILING FEE<br>RECEIVED<br>1013 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
|                                |                                                                                                                   | <input type="checkbox"/> 1.16 Fees ( Filing )                     |
|                                |                                                                                                                   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
|                                |                                                                                                                   | <input type="checkbox"/> 1.18 Fees ( Issue )                      |
|                                |                                                                                                                   | <input type="checkbox"/> Other _____                              |
|                                |                                                                                                                   | <input type="checkbox"/> Credit                                   |